### STATE OF NEW HAMPSHIRE

### 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

### PLEASE PRINT

I. Name of Lobbyis	t(s) David Co	ollins	Gina	Powers	Glenn	Wallace,	Richard	Parsons
•						d McKillo		
II. Name of lobbyis	t's partnership, f	irm or cor	poration,	if any:				
Rath, Young	and Pigna	telli,	P.C.					
(N	ame of partnership,	firm or corp	oration)				· · · · · · · · · · · · · · · · · · ·	
One Capital	Plaza		Con	cord	N	Н	0330	1
Business Address: (			(Town/City			ate)	(Zip Code)	
603 226-26	500	(603)	226-2	700	e-mail	dgc@rathl	aw.com	
(603 226-26 (Telephone)	)	. \ /_	(	700 Fax)	•			
III. This statement	covers: (Choose	nna – fila s	anarata re	marts for ea	ch client ()	NR vou may file	a senarate ren	ort for
reportable expense						ok you may me	a separate rep	011101
				·				
☐ All reportable tra	ansactions occurri	ng in the m	onths prior	r to the repor	ting date rel	lative to the follo	wing client:	
	RAI Servi	es Comp	any					
	(Full Name of C			e Lobbyist Re	gistration Fo	rm)		
<u>OR</u>								
☐ All reportable tra	•	obbyist (inc	luding the	lobbyist's fa	mily), or th	e lobbying firm	listed below wh	iich are
unrelated to any part	icular client.							
IV Date of Depart	April 26, 201	<b>7</b> 🗀			July 26, 20	17 🕅		
IV. Date of Report  Reports cover: act	ivity from date of re		0 3/31/17		from 4/1/17			
action of the second of the se	October 25, 2	_		-	January 31,			
	activity from 7/1/		7			77 to 12/31/17		
V. There have bee								
If this box is checked Concord, NH 03301.		s jorm and	Suomii ii i	o ine secreio	iry oj siale	s Office, state 11	ouse, Noom 20	71
VI. Check if addition	•			<i>a.</i>				
If you have rece								
☐ If you have paid Expense Reimburser	an honorarium or nent	reimburse	d expenses	s, you must fi	le Addendi	um B- Report of	Honorariums of	or
☐ If you, your firm	ı, or your family h	as made po	olitical con	tributions, yo	ou must file	Addendum C-	Political Contri	ibutions
Sworn Statement/A	ffirmation by Lo	bbyist						•
I have read RSA 15,				nd hereby sw	ear or affirn	n that the foregor	ing information	is true
and complete to the	Service in the servic	age and be	ilei.					
NUS	The state of				July 26, 2	017		
(Signature of lobby	st)		_			(Date)		
David G. Co	llins							
(Print Name of John			_					

# P L E A S E P R I N T

## STATE OF NEW HAMPSHIRE



# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) <u>David Collins/Gina Powers/Glenn Wallace/R</u>	Richard Parsons/David McKillop
II. Name of lobbyist's partnership, firm or corporation, if any:	
Rath Young and Pignatelli, P.C.	
(Name of partnership, firm or corporation)	
III. Name of Client RAI Services Company	Date July 26, 2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$17,550.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$17,146.42
c) Total of all fees received to date (Add lines a and b)	c) \$34,696.42
<ul> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid expenses; (b) the aggregate total of all ele: meals purchased during a business so than \$10 that is given to the person of with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a ter than \$25, but not greater than \$50, expense reimbursement, or political
<ul><li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li><li>b) Total aggregate of expenditures during this reporting period, not reported</li></ul>	a) \$17,550.00
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$17,550.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$34,696.42
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
r Tarangan dan salah s	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
(Signature of labbyist)	July 26, 2017 (Date)
David G. Collins	

(Print Name of lobbyist)